

Submit report each quarter by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name: Kinder Morgan Linnton – IRAM System

County: Multnomah

Facility Location: 11400 NW St. Helens Rd. Portland, Oregon

Quarter/Year: September/2005

Monitoring Report After First Six Months of Operation

(but only if all effluent limits met for previous six consecutive months of monitoring - see permit)

Parameter and Requirements	Sample Date	Sample Results
Effluent flow (gallons per day) – Shall be measured/estimated quarterly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	9/16/05	7336
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured quarterly. Shall not exceed 1 mg/L. Grab sample.	9/16/05	ND (<0.500)
pH (Standard Units) – Shall be measured quarterly. Shall be within range of 6.0 to 9.0. Grab sample.	9/16/05	6.9
Benzene (mg/L) – Shall be measured quarterly. Shall not exceed 0.025 mg/L. Grab sample.	9/16/05	ND (<0.0005)
BETX (mg/L) – Shall be measured quarterly. Shall not exceed 0.25 mg/L. Grab sample.	9/16/05	ND (<0.0025)
Lead (mg/L) - Shall be measured quarterly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

Signature Requirement

I certify, under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Signature of Responsible Official:

Name and Title (Please Print): Wally Stevenson - Area Manager

Date of Signature: 10/4/05 Telephone: : 503-220-1263\_\_\_\_



Submit report each quarter by 15<sup>th</sup> of following month to:

Oregon DEQ

Kinder Morgan Liquid Terminals LLC Legal Name:

Site/File ID #: 32300

Common Name:

Kinder Morgan Linnton - IRAM System

County: Multnomah

Facility Location: 11400 NW St. Helens Rd. Portland, Oregon

Quarter/Year: August/2005

Monitoring Report After First Six Months of Operation

(but only if all effluent limits met for previous six consecutive months of monitoring - see permit)

Parameter and Regultrements :	Sample Date	Sample Results
Effluent flow (gallons per day) – Shall be measured/estimated quarterly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	8/16/05	8716
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured quarterly. Shall not exceed 1 mg/L. Grab sample.	8/16/05	ND (<0.500)
<b>pH</b> (Standard Units) – Shall be measured quarterly. Shall be within range of 6.0 to 9.0. Grab sample.	8/16/05	6.6
Benzene (mg/L) – Shall be measured quarterly. Shall not exceed 0.025 mg/L. Grab sample.	8/16/05	ND (<0.0005)
BETX (mg/L) – Shall be measured quarterly. Shall not exceed 0.25 mg/L. Grab sample.	8/16/05	ND (<0.0025)
Lead (mg/L) – Shall be measured quarterly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	' NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

#### Signature Requirement

Signature of Responsible Official: WHS User
Name and Title (Please Print): Wally Stevenson – Area Manager
Date of Signature: 9/8/05 Telephone: : 503-220-1263



Submit report each quarter by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name:

Kinder Morgan Linnton – IRAM System

Multnomah County:

Facility Location: 11400 NW St. Helens Rd. Portland, Oregon

Quarter/Year: July/2005

Monitoring Report After First Six Months of Operation

(but only if all effluent limits met for previous six consecutive months of monitoring - see permit)

Parameter and Requirements	Sample Date	Sample Results:
Effluent flow (gallons per day) – Shall be measured/estimated quarterly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	7/11/05	8,338
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured quarterly. Shall not exceed 1 mg/L. Grab sample.	7/11/05	ND (<0.500)
<b>pH</b> (Standard Units) – Shall be measured quarterly. Shall be within range of 6.0 to 9.0. Grab sample.	7/11/05	6.5
Benzene (mg/L) – Shall be measured quarterly. Shall not exceed 0.025 mg/L. Grab sample.	7/11/05	ND (<0.0005)
BETX (mg/L) - Shall be measured quarterly. Shall not exceed 0.25 mg/L. Grab sample.	7/11/05	ND (<0.0025)
Lead (mg/L) – Shall be measured quarterly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

### Signature Requirement

Signature of Responsible Official: White twenser	
Name and Title (Please Print): Wally Stevenson – Area Manager	
Date of Signature: 8 1105 Telephone: : 503-220-1263	



Submit report each quarter by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name: Kinder Morgan Linnton – IRAM System

County: Multnomah

Facility Location: , 11400 NW St. Helens Rd. Portland, Oregon

Quarter/Year: June/2005

Monitoring Report After First Six Months of Operation

(but only if all effluent limits met for previous six consecutive months of monitoring - see permit)

Parameter and Requirements	Sample Date	Sample Results
Effluent flow (gallons per day) – Shall be measured/estimated quarterly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	6/13/05	6703
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured quarterly. Shall not exceed 1 mg/L. Grab sample.	6/13/05	ND (<0.500)
<b>pH</b> (Standard Units) – Shall be measured quarterly. Shall be within range of 6.0 to 9.0. Grab sample.	6/13/05	6.9
Benzene (mg/L) – Shall be measured quarterly. Shall not exceed 0.025 mg/L. Grab sample.	6/13/05	ND (<0.0005)
BETX (mg/L) – Shall be measured quarterly. Shall not exceed 0.25 mg/L. Grab sample.	6/13/05	ND (<0.0025)
Lead (mg/L) – Shall be measured quarterly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

### Signature Requirement

Signature of Responsible Official:	Tellen
Name and Title (Please Print): Wally Stevenso	on – Area Manager
Date of Signature: Telephone: :	503-220-1263



Submit report each quarter by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name: Kinder Morgan Linnton – IRAM System

County: Multnomah

Facility Location: , 11400 NW St. Helens Rd. Portland, Oregon

Quarter/Year: May/2005

**Monitoring Report After First Six Months of Operation** 

(but only if all effluent limits met for previous six consecutive months of monitoring - see permit)

Parameter and Regultements:	Sample Date	Sample Results
Effluent flow (gallons per day) — Shall be measured/estimated quarterly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	5/20/05	5689
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured quarterly. Shall not exceed 1 mg/L. Grab sample.	5/20/05	0.579
<b>pH</b> (Standard Units) – Shall be measured quarterly. Shall be within range of 6.0 to 9.0. Grab sample.	5/20/05	6.7
Benzene (mg/L) – Shall be measured quarterly. Shall not exceed 0.025 mg/L. Grab sample.	5/20/05	ND (<0.0005)
BETX (mg/L) – Shall be measured quarterly. Shall not exceed 0.25 mg/L. Grab sample.	5/20/05	ND (<0.0025)
Lead (mg/L) – Shall be measured quarterly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

### Signature Requirement

Signature of Responsible Officia	1:WH Stevenson	
Name and Title (Please Print): Wally Stevenson – Area Manager		
Date of Signature:	Telephone: : 503-220-1263	



Submit report each quarter by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name: Kinder Morgan Linnton – IRAM System

County: Multnomah

Facility Location: , 11400 NW St. Helens Rd. Portland, Oregon

Quarter/Year: April/2005

Monitoring Report After First Six Months of Operation

(but only if all effluent limits met for previous six consecutive months of monitoring - see permit)

Parameter and Requirements	Sample Date	Sample Results
Effluent flow (gallons per day) — Shall be measured/estimated quarterly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	4/15/05	2156
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured quarterly. Shall not exceed 1 mg/L. Grab sample.	4/15/05	ND (<0.500)
<b>pH</b> (Standard Units) – Shall be measured quarterly. Shall be within range of 6.0 to 9.0. Grab sample.	4/15/05	6.8
Benzene (mg/L) – Shall be measured quarterly. Shall not exceed 0.025 mg/L. Grab sample.	4/15/05	ND (<0.0005)
BETX (mg/L) – Shall be measured quarterly. Shall not exceed 0.25 mg/L. Grab sample.	4/15/05	ND (<0.0025)
Lead (mg/L) – Shall be measured quarterly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

Signature Requirement

Signature of Responsible Official: WWS Lurews-ex	_
Nowe and Title (Blaces Brint): Mally Stavenson Area Manager	
Name and Title (Please Print): Wally Stevenson – Area Manager	-
Date of Signature: 5/6/55 Telephone: : 503-220-1263	



Submit report each quarter by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name: Kinder Morgan Linnton – IRAM System

County: Multnomah

Facility Location: , 11400 NW St. Helens Rd. Portland, Oregon

Quarter/Year: March/2005

Monitoring Report After First Six Months of Operation

(but only if all effluent limits met for previous six consecutive months of monitoring - see permit)

Parameter and Requirements	Sample Date	Sample Results
Effluent flow (gallons per day) – Shall be measured/estimated quarterly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	None System not operational, No discharge.	No discharge in March 2005. System being repaired. Anticipate restart in April, 2005
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured quarterly. Shall not exceed 1 mg/L. Grab sample.	NA	NA
<b>pH</b> (Standard Units) – Shall be measured quarterly. Shall be within range of 6.0 to 9.0. Grab sample.	NA	NA
Benzene (mg/L) – Shall be measured quarterly. Shall not exceed 0.025 mg/L. Grab sample.	NA	NA
BETX (mg/L) – Shall be measured quarterly. Shall not exceed 0.25 mg/L. Grab sample.	NA	NA
Lead (mg/L) – Shall be measured quarterly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

### Signature Requirement

Signature of Responsible Official: WH Stevens			
Name and Title (Please Print): Wally Stevenson – Area Manager			
Date of Signature: 4/6/05 Telephone: 503-220-1263			



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Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name: Kinder Morgan Linnton – IRAM System

County: Multnomah

Facility Location: , 11400 NW St. Helens Rd. Portland, Oregon

Quarter/Year: Feb/2005

Monitoring Report After First Six Months of Operation

(but only if all effluent limits met for previous six consecutive months of monitoring - see permit)

Parameterand Requirements	Sample Date	Sample Results
Effluent flow (gallons per day) — Shall be measured/estimated quarterly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	2/17/05	1861
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured quarterly. Shall not exceed 1 mg/L. Grab sample.	2/17/05	ND (<0.500)
<b>pH</b> (Standard Units) – Shall be measured quarterly. Shall be within range of 6.0 to 9.0. Grab sample.	2/17/05	6.49
Benzene (mg/L) – Shall be measured quarterly. Shall not exceed 0.025 mg/L. Grab sample.	2/17/05	ND (<0.0005)
BETX (mg/L) – Shall be measured quarterly. Shall not exceed 0.25 mg/L. Grab sample.	2/17/05	ND (<0.0025)
Lead (mg/L) – Shall be measured quarterly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

#### Signature Requirement

Signature of Responsible Official: WHStwenn	
Name and Title (Please Print): Wally Stevenson – Area Manager	
Date of Signature: 3 4105 Telephone: 503-220-1263	



Submit report monthly by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

**Common Name:** 

Kinder Morgan Linnton – IRAM System

County: Multnomah

**Facility Location:** 

11400 NW St. Helens Rd. Portland, Oregon

Month/Year:Jan/2005

Monitoring Report for Months Two Through Six of Operation

Monitoring Report for Months 1 we Infough Six of Operation			
Parameter and Reguillements	SampleDate	Sample Results	
	1/19/05	4878	
Effluent flow (gallons per day) – Shall be measured/estimated monthly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.			
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured monthly. Shall not exceed 1 mg/L. Grab sample.	1/19/05	ND (<0.500)	
pH (Standard Units) – Shall be measured monthly. Shall be within range of 6.0 to 9.0. Grab sample.	1/19/05	6.85	
Benzene (mg/L) – Shall be measured monthly. Shall not exceed 0.025 mg/L. Grab sample.	1/19/05	ND (<0.0005)	
BETX (mg/L) — Shall be measured monthly. Shall not exceed 0.25 mg/L. Grab sample,	1/19/05	ND (<0.0025)	
Lead (mg/L) – Shall be measured monthly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA	

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

#### Signature Requirement

I certify, under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Signature of Responsible Official: WHSTevenson

Name and Title (Please Print): Wally Stevenson - Area Manager

Date of Signature: 2/3/05 Telephone: 503-220-1263\_\_\_\_\_



Submit report monthly by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name:

Kinder Morgan Linnton - IRAM System

County: Multnomah

**Facility Location:** 

11400 NW St. Helens Rd. Portland, Oregon

Month/Year: Dec/2004

Monitoring Report for Months Two Through Six of Operation

Parameter and Requirements	Sample Date	Sample Results
Effluent flow (gallons per day) – Shall be measured/estimated monthly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	12/16/04	3647
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured monthly. Shall not exceed 1 mg/L. Grab sample.	12/16/04	ND (<0.500)
<b>pH</b> (Standard Units) – Shall be measured monthly. Shall be within range of 6.0 to 9.0. Grab sample.	12/16/04	6.82
Benzene (mg/L) - Shall be measured monthly. Shall not exceed 0.025 mg/L. Grab sample.	12/16/04	ND (<0.0005)
BETX (mg/L) – Shall be measured monthly. Shall not exceed 0.25 mg/L. Grab sample.	12/16/04	ND (<0.0025)
Lead (mg/L) – Shall be measured monthly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

#### Signature Requirement

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Signature of Responsible Official:	-2 WW	twenger	

Name and Title (Please Print): Wally Stevenson – Area Manager

Date of Signature: 1/6/85 Telephone: 503-220-1263\_\_\_\_\_



Submit report monthly by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Morgan Liquid Terminals LLC

Site/File ID #: 32300

Common Name: .

Kinder Morgan Linnton – IRAM System

County: Multnomah

**Facility Location:** 

11400 NW St. Helens Rd. Portland, Oregon

Month/Year:Nov/2004

Monitoring Report for Months Two Through Six of Operation

Perameter and Requirements	Sample Date	Sample Results
Effluent flow (gallons per day) – Shall be measured/estimated monthly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	11/1204	2758
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured monthly. Shall not exceed 1 mg/L. Grab sample.	11/1204	ND (<0.500)
<b>pH</b> (Standard Units) – Shall be measured monthly. Shall be within range of 6.0 to 9.0. Grab sample.	11/1204	6.8
Benzene (mg/L) – Shall be measured monthly. Shall not exceed 0.025 mg/L. Grab sample.	11/1204 11/12/04	ND (<0.0005)
BETX (mg/L) – Shall be measured monthly. Shall not exceed 0.25 mg/L. Grab sample.	11/1204	ND (<0.0025)
Lead (mg/L) – Shall be measured monthly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	NA	NA .

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

### Signature Requirement

Signature of Responsible Official: WH Stevenson				
Name and Title (Please Print): Wally Stevenson – Area Manager  Date of Signature: 2/10/0 Telephone: 503-220-1263				
Date of Signature: 2/18/04 Telephone: 503-220-1263				



Submit report monthly by 15<sup>th</sup> of following month to:

Oregon DEQ

Legal Name: Kinder Mo

Kinder Morgan Liquid Terminals LLC

Site/File ID #:

32300

**Common Name:** 

Kinder Morgan Linnton - IRAM System

County:

Multnomah

**Facility Location:** 

11400 NW St. Helens Rd. Portland, Oregon

Month/Year: Oct/2004

Monitoring Report for Months Two Through Six of Operation

Parameter and Requirements	Sample Date	Sample Results
Effluent flow (gallons per day) – Shall be measured/estimated monthly. No limit, however the ratio of stream flow to effluent show shall be 10 to 1 or greater at all times.	10/11/04	1629
Effluent Total Petroleum Hydrocarbons (TPH, mg/L) - Shall be measured monthly. Shall not exceed 1 mg/L. Grab sample.	10/11/04	ND (<0.500)
pH (Standard Units) – Shall be measured monthly. Shall be within range of 6.0 to 9.0. Grab sample.	10/11/04	6.77
Benzene (mg/L) – Shall be measured monthly. Shall not exceed 0.025 mg/L. Grab sample.	10/11/04	ND (<0.0005)
BETX (mg/L) – Shall be measured monthly. Shall not exceed 0.25 mg/L. Grab sample.	10/11/04	ND (<0.0025)
Lead (mg/L) — Shall be measured monthly, but only if water is contaminated with leaded fuels and where detectable levels of lead have been found in influent to treatment system.	10/11/04	ND (<0.00100)

Note – If there are any effluent violations, attach a brief description of the violations, the cause of the violations, and the actions you have taken to correct the violations. Sign the attachment.

### Signature Requirement

I certify, under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Signature of Responsible Official:	<u> </u>	JU Stevenson
•		

Name and Title (Please Print): Wally Stevenson – Area Manager

Date of Signature: 11/2/04 Telephone: 503-220-1263\_\_\_\_\_